UNITED STATES SECURITIES

S AND EXCHANGE COMMISSION
ashington, D.C. 20549

FORM D

NC P UNIFOR

OMB API	PROVAL '
OMB Number: Expires March Estimated average hours per response	burden



TICE OF SALE OF SECURITIES	SEC USE ONLY						
URSUANT TO REGULATION D, SECTION 4(6), AND/OR	Prefix	Serial					
RM LIMITED OFFERING EXEMPTION	DATE RECEIVED						

	ent and name has changed, and indicate change.)	
Goldman Sachs Direct Strategies Fundame	ental Fund, LLC: Limited Liability Company	Units
• , , ,,	Rule 504 □ Rule 505 ☑ Rule 506	□ Section 4(6) □=ULOE
Type of Filing:	nent	
	A. BASIC IDENTIFICATION DATA	MAP 9 7 2000
1. Enter the information requested about the issu	ıer	3 2009
•	ent and name has changed, and indicate change.)	THOWISONREUTERS
Goldman Sachs Direct Strategies Fundame		· · · · · · · · · · · · · · · · · · ·
Address of Executive Offices (None New York Plaza, New York, New Y	umber and Street, City, State Zip Code)	Telephone Number (including Area Code) (212) 902-1000
<u> </u>		` /
Address of Principal Business Operations (if different from Executive Offices)	Number and Street, State and Zip Code) Mall Processing Section	Telephone Number (Including Area Code)
Brief Description of Business	Gu	200 C. Caller
To operate as a private investment fund.	MAR 13 200t	1 1 1 1 2 3 ED
Type of Business Organization	BB	
☐ corporation	limited partiership fülleady formed	✓ other (please specify):
□ business trust	☐ limited partnership, (16) be formed	Limited Liability Company
	Month Year	
Actual or Estimated Date of Incorporation or Org	ganization: 0 7 0 7	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia State: CN for Canada; FN for other foreign jur	
GENERAL INSTRUCTIONS		

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

	A. BASIC IDENTIFICATION DATA	
ź.	Enter the information requested for the following:	
	* Each promoter of the issuer, if the issuer has been organized within the past five years;	
	 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity secure of the issuer; 	rities
	* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
	* Each general and managing partner of partnership issuers.	
Che	k Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner	
Full	Name (Last name first, if individual)	
Gol	man Sachs Hedge Fund Strategies LLC (the Issuer's Managing Member)	
Bus	ness or Residence Address (Number and Street, City, State, Zip Code)	
One	New York Plaza, New York, NY 10004	
Cho	k Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner	
Full	Name (Last name first, if individual)	
Bar	etta, Jennifer	
Bus	ness or Residence Address (Number and Street, City, State, Zip Code)	
One	New York Plaza, New York, NY 10004	
Che	k Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or *of the Issuer's Managing Member Managing Partner	
	Name (Last name first, if individual)	
	k, Kent	
	ness or Residence Address (Number and Street, City, State, Zip Code)	
	New York Plaza, New York, NY 10004	
Che	k Box(es) that Apply:	
Full	Name (Last name first, if individual)	
Bus	ness or Residence Address (Number and Street, City, State, Zip Code)	
Che	k Box(cs) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner	
Full	Name (Last name first, if individual)	
Bus	ness or Residence Address (Number and Street, City, State, Zip Code)	
Che	k Box(es) that Apply:	
Full	Name (Last name first, if individual)	
Bus	ness or Residence Address (Number and Street, City, State, Zip Code)	
Che	k Box(es) that Apply:	
Full	Name (Last name first, if individual)	
Bus	ess or Residence Address (Number and Street, City, State, Zip Code)	

				B. INI	FORMAT	ION ABC	UT OFFI	ERING	***			
	**				7.			<u></u>			Yes	No
🎉. Has th	e issuer solo	l, or does th										፟
			A	inswer also	in Appendi	ix, Column	2, if filing u	inder ULOE	5.			
2. What is the minimum investment that will be accepted from any individual?											\$	0,000*
*The Issu 3. Does	er may acco	e pt subscri p permit joint	ptions for le	esser amou of a single	nts in the so	ole discreti	on of the M	lanaging M	ember.		Yes ☑	No □
	the informa											
comm	ission or sin	nilar remun	eration for s	olicitation	of purchase	rs in connec	ction with s	ales of secu	rities in the	offering.		
If a pe	erson to be li	sted is an a	ssociated pe broker or de	rson or age	ent of a brok ore than five	er or dealer (5) person	registered s to be liste	with the SE d are associ	C and/or wi ated person	tn a state s of such		
a brok	er or dealer,	you may so	t forth the i	nformation	for that bro	ker or deal	er only.		•			
Full Name	e (Last name	first, if ind	ividual)									
Goldman	, Sachs & C	o.										
Business	or Residence	Address (1	Number and	Street, City	y, State, Zip	Code)						
85 Broad	Street, Nev	v York, Nev	w York 100	004	_							
	Associated E											
	Which Perso 'All States" o										—	II States
•			[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(ні)	[ID]
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[RI]	[SC]	[SD]	(TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]
	e (Last name	first, if ind	ividual)	-				*				
											_	
Business	or Residence	Address (1	Number and	Street, City	y, State, Zip	Code)						•
Name of A	Associated B	roker or De	aler									
	Which Perso										П АІ	l States
•	'All States" ((CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 [HI]	[ID]
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
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[R!]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	e (Last name	first, if ind	ividual)									
											<u></u>	
Business	or Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of	Associated E	Broker or De	ealer			-	·			_		
												
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$_	0	. 9	\$_	0
	Equity	\$	0		§ _	0
	□ Common □ Preferred		-			
	Convertible Securities (including warrants)	\$	0	9	\$	0
	Partnership Interests		0	- 5	\$	0
	Other (Specify: Limited Liability Company Units)		53.178.873	- 9	\$ _	53,178,873
	Total			_	` — }	53,178,873
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ-	55,110,010	- `	-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					Aggregate
			Number Investors			Dollar Amount of Purchases
	Accredited Investors	_	51	_	\$_	53,178,873
	Non-accredited Investors	_	N/A		\$_	N/A
	Total (for filings under Rule 504 only)	_	N/A		\$_	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of			Dollar Amount
	Type of offering		Security			Sold
	Rule 505	_	N/A	. :	\$ _	N/A
	Regulation A		N/A		§ _	N/A
	Rule 504		N/A		§ _	N/A
	Total		N/A	5	5	N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_				
	Transfer Agent's Fees			5	§ _	0
	Printing and Engraving Costs			5	§	0
	Legal Fees		Ø	9	§ _	105,515
	Accounting Fees		Ö	9	\$_	0
	Engineering Fees			5	§ _	0
	Sales Commissions (specify finders' fees separately)			5	\$ <u></u>	0
	Other Expenses (identify)			5	, ,	0
	Total		Ø	9	- 5	105.515

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUM	BER OF INVESTORS, E	XPENS	ES A	AND USE OF P	ROCE	EDS	
•	b. Enter the difference between the aggregate o - Question 1 and total expenses furnished in re difference is the "adjusted gross proceeds to the is	ffering price given in response sponse to Part C - Question	e to Part 4.a. Th	C is		\$_		53,073,358
5.	Indicate below the amount of the adjusted gross to be used for each of the purposes shown. If th furnish an estimate and check the box to the payments listed must equal the adjusted gross proto Part C - Question 4.b. above.	e amount for any purpose is r left of the estimate. The to	ot know otal of th	n, ie				
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees			\$_	0		\$_	0
	Purchase of real estate	.,	🗖	\$_	0		\$_	0
	Purchase, rental or leasing and installation of mad	chinery and equipment	🗖	\$_	0		\$_	0
	Construction or leasing of plant buildings and fac	ilities	🗖	\$	0		\$	0
	Acquisition of other businesses (including the vathis offering that may be used in exchange fo another issuer pursuant to a merger)	r the assets or securities of		\$	0		\$	0
	Repayment of indebtedness		🗅	\$	0		\$	0
	Working capital			\$	0		s	0
	Other (specify): Investment Capital.			s	0	2	s –	53,073,358
	Column Totals		🗆	\$ _	0		\$_	53,073,358
	Total Payments Listed (column totals added)				⊠ \$	53,07	3,358	<u> </u>
		D. FEDERAL SIGNAT	URE					
fo	ne issuer has duly caused this notice to be signed flowing signature constitutes an undertaking by the its staff, the information furnished by the issuer to	e issuer to furnish to the U.S	. Securiti	es an	d Exchange Comn	nission,	upon	r Rule 505, the written request
ssu	er (Print or Type)	Signature			Date			
	dman Sachs Direct Strategies Fundamental	and l	V		March <u> </u>	9		
Van	ne of Signer (Print or Type) id Kraut	Title of Signer (Print or Typ Vice President of the Issue		ging	Member			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

END